

Project

P. O. Box 7970 Madison, Wisconsin 53707 (608) 266-1018 TDD #: (608) 264-8777 www.commerce.state.wi.us

Jim Doyle, Governor Cory L. Nettles, Secretary

COM178 (10/99)

I.

Follow-Up Report on Employment Impact Estimates for an Industrial Revenue Bond Project

Section 66.1103 (4m) (b) of the Wisconsin Statutes requires the eligible participant who has entered into a revenue agreement with a municipality to submit to the Department of Commerce within 12 months after the project is completed or 2 years after a revenue bond is issued to finance the project, whichever is sooner, the net number of full-time jobs eliminated, created, or maintained on the project site and elsewhere in Wisconsin as a result of the project, the subject of which this report is being submitted.

| A. | Person: | | | | | | |
|----|---|-------------|-------------------|---------------------------|-----------------------|--------------------|--------------------------------|
| | Address: Post Office/ZIP | | | | | | |
| B. | Project site: | | /Nome of a | ity, village or town in w | high the project is I | a actad\ | |
| C. | Maximum amount of IRB fir | nancing: | • | ity, village of town in w | mich the project is i | ocated) | |
| D. | Date bonds/loan issued: | | | | | | |
| E. | Date project completed (if completed): | Month | | Day | | Year | |
| | (ii completed). | Month | | Day | | Year | |
| | w Employment (that resulte enue bond was issued, wh | | | fter the project | was comple | eted or 2 years | Net Total |
| | Number of Full-Time Job | s | Before Project | Jobs Maintained | Jobs Created | Jobs Eliminated | Net Total Number of Jobs |
| Α. | At the Project Site | | | | | | |
| B. | At All Other Wisconsin Ope | erations | | | | | |
| C. | Net Totals | | | | | | |
| D. | Did any jobs transfer from one or more locations to the project site? | | | | | | |
| | Number of jobs transferred | : | | | | | |
| | Location(s) the jobs transfe | erred from | : (municipality | <u> </u> | | | |
| | Number of employees that | did not tra | ansfer with the | e transferred job | os: | | |
| | Signed/Person completing this form | 1 | | | Title | | Date |
| | | | | | | | |